

UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 426882007500

First Inventor Oyvind STROMME

Title AUTOMATIC TRAFFIC SIGN RECOGNITION

Express Mail Label No. EV302339996US

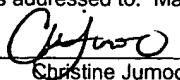
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Date of Deposit: July 7, 2003

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Christine Jumoc

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:
Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

1. Fee Transmittal Form (e.g. PTO/SB/17) w/copy (2 pages)
(Submit an original, and a duplicate for fee processing)

2. Applicant claims small entity status.
See 37 CFR 1.27.

3. Specification [Total Pages 9]
(preferred arrangement set forth below)
- Descriptive title of the Invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. Drawing(s) (35 USC 113) [Total Sheets 2]

5. Oath or Declaration (signed) [Total Pages 2]
a. Newly executed (original or copy)
b. Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)

6. Application Data Sheet. See 37 CFR 1.76 (2 pages)

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
a. Computer Readable Form (CRF)
b. Specification Sequence Listing on:
i. CD-ROM or CD-R; or
ii. paper
c. Statements verifying identify of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & documents)

10. 37 CFR 3.73(b) Statement
(where there is an assignee) Power of Attorney

11. English Translation document (if applicable)

12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations

13. Preliminary Amendment (3 pages)

14. Return Receipt Postcard (MPEP 503)
Should be specifically itemized

15. Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent

17. Other:

18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No:

Prior application information: Examiner: Group / Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. This incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

 Customer Number or Bar Code Labelor Correspondence address below

35452

PATENT TRADEMARK OFFICE

(Insert Customer No. or Attach bar code label here)

Name			
Address			
City	State	Zip Code	
Country	Telephone	(415) 268-7000	Fax
Name (Print/Type)	Robert E. Scheid	Registration No. (Attorney/Agent)	42,126
Signature			
	Date July 7, 2003		

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 750.00)

Complete if Known

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Oyvind STROMME
Examiner Name	To Be Assigned
Group Art Unit	To Be Assigned
Attorney Docket No.	426882007500

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None
 Deposit Account

Deposit Account Number 03-1952

Deposit Account Name Morrison & Foerster LLP

The Commissioner is hereby authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee

to the above-identified deposit account.

FEE CALCULATION (continued)

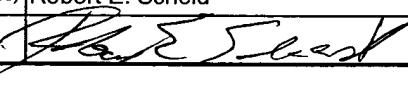
3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	410	2252	205
1253	930	2253	465
1254	1,450	2254	725
1255	1,970	2255	985
1401	320	2401	160
1402	320	2402	160
1403	280	2403	140
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,300	2453	650
1501	1,300	2501	650
1502	470	2502	235
1503	630	2503	315
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	750	2809	375
1810	750	2810	375
1801	750	2801	375
1802	900	1802	900
Other fee (specify)			

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00)

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	Robert E. Scheid	Registration No. (Attorney/Agent)	42,126	Telephone (415) 268-7000
Signature		Date	July 7, 2003	

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S Dated: July 7, 2003

Signature:  (Christine Jumoc)